

Incontinence in three age groups among older adults: prevalence and interventions



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Introduction

Incontinence, which includes urinary, faecal and double incontinence¹, is common among older persons and can lead to negative consequences such as incontinence-associated dermatitis². Moreover, incontinence negatively affects quality of life³. However, a detailed insight into prevalence and used nursing interventions regarding incontinence in different age group among older adults is still missing. Therefore, the aim of this study was to investigate differences in the prevalence and nursing interventions focused on urinary incontinence among persons 65-74 years, 75-84 years and 85 years or older.

Methods

This is a secondary data analysis of data collected within the “Nursing Care Quality” measurement in Austria. We used data from the years 2016 up to 2022, except for the year 2020 due to the worldwide pandemic, from hospitals, geriatric institutions and nursing homes. We included data from adults 65 years or older. Based on data available from the national statistical agency the power calculation enabled us to identify an ideal sample size of 385 patients/residents. Descriptive statistics and bivariate analysis were performed. The responsible ethical committee approved the study and a written informed consent, was signed either from the patient or the legal representative.

Results

Results: The three age groups differed statistically significant in terms of care dependency, activity/mobility items on the Braden scale or the most frequent medical diagnosis as well mean number of medical diagnosis.

	65-74 Years ^M	75-84 Years ^M	≥ 85 Years ^M
Urinary incontinence %*	18.5	30.6	51.7
Fecal incontinence %*	9.3	12.7	23.9
Double incontinence %*	7.8	10.7	22.1
Urinary incontinence only %*	11.6	22.3	38.0
Fecal incontinence only %	1.6	2.2	2.3

Table 1 shows the differences between the three age groups regarding different ways of calculating the prevalence rates.

The most frequent applied interventions (Figure 1) were absorbent products, urinals and toileting aids. The age groups also differed statistically significant with regard to PFMT and evaluation of the medication. The analysis also showed, that the assessment of the type of urinary incontinence was only performed in 25% up to 29%.

Interpretation of the results

This analysis showed that the way of calculating prevalence rates influences the results. Therefore, researchers need to consider the clinical relevance, when displaying results with regard to incontinence. With regard to management, most frequent applied interventions were absorbent products, urinals and toileting aids. The analysis also showed differences between the age groups, when PFMT, which is often done by physiotherapists. This is interesting, as bladder training, which is mostly trained by nursing staff was more often conducted. Both interventions are based on the physiology regarding incontinence. This can lead to the conclusion, that nursing staff might not be aware of the benefits of PFMT among older adults. Up to 29% of the type of urinary incontinence was assessed. Here is still space for improvement in nursing practice.

Concluding message

Clinical relevance has to be considered in order to present meaningful incontinence prevalence rates. Moreover the knowledge about benefits of PFMT among older adults in nursing staff shall be improved.

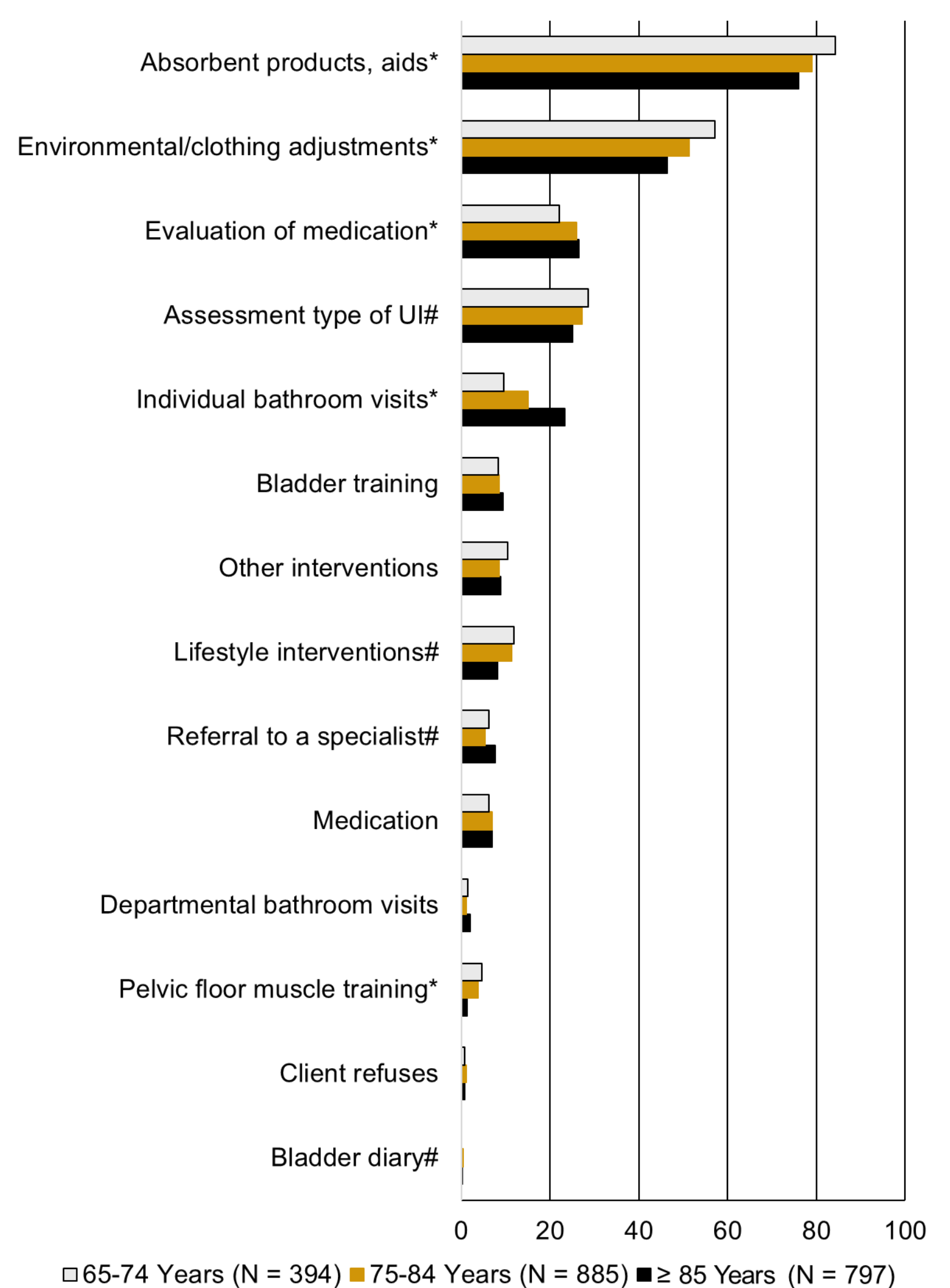


Figure 1. Frequency of the conducted interventions for urinary incontinent patients per age group in percentage (* $p < 0.05$ statistically significant difference between the age groups; #Missing values, as not collected in the year 2016)

References (1) Cardozo, L, Rovner, E, Wagg, A, Wein, A, Abrams, P. (Eds) Incontinence 7th Edition (2023). ICI-ICS. International Continence Society, Bristol UK, ISBN: 978-0-9569607-4-0. (2) Boronat-Garrido X, Kottner J, Schmitz G, Lahmann N. Incontinence-Associated Dermatitis in Nursing Homes: Prevalence, Severity, and Risk Factors in Residents With Urinary and/or Fecal Incontinence. *J Wound Ostomy Continence Nurs.* 2016;43(6):630-5. (3) Göral Türkcü S, Kukulcu K. Urinary incontinence and quality of life of women living in nursing homes in the Mediterranean region of Turkey. *Psychogeriatrics.* 2017;17(6):446-52.